FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS  CAMPAIGN TREASURER'S REPORT SUMMARY						
1) 012/10						
(1) TOWALD CONTROLLEY	(2)					
Candidate, Committee or Party Name  (3) 3927 CARDE W AVERVAL						
(3) 3937 OARDO 11/10/02 Address (number and street)	City State Zip Code					
Check box if address has changed since last	report					
(4) Check appropriate box(es):						
Candidate (office sought):						
Political Committee	Check if PC has DISBANDED  Check if CCE has DISBANDED					
Committee of Continuous Existence	Check if CCE has DISBANDED O					
Party Executive Committee	Check if CCE has DISBANDED OFFIC 57					
(5) REPORT	IDENTIFIERS					
Cover Period: From 10 / 11 / 03 To 10	0/30/03 Report Type <u>F.3</u>					
Original Amendment Special Elec	tion Report Independent Expenditure Report					
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT					
Cash & Checks \$	Monetary S 10,115					
Loans \$ <u>,</u> ,	Transfers to Office Account \$					
Total Monetary \$,,	Total Monetary \$,,					
In-kind \$,,	(8) Other Distributions \$,					
(9) TOTAL Monetary Contributions to Date \$	(10) TOTAL Monetary Expenditures to Date \$					
(11) CERTIFICATION						
It is a first degree misdemeanor for any pers	on to falsify a public record (ss. 839.13, F.S.)					
I certify that I have examined this report and it is true, dorrect and complete	I certify that I have examined this report and it is true correct and complete					
Name of Treasurer Deputy Treasurer Signature	Name of Oandidate Chairman (PC/PTY Only) Signature					
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CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS  1) Name (2) I.D. Number									
1) Name	TOWALD CT	YOU	200	_	Page		· · · · ·		
3) Cover Perido (5)	(7)	10/2	(8)	(9)	(10)	(11)	(12)		
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Col	Occupation	Contribution Type	ln-kind Description	Amendment	Amount		
//	NO COUNTRIBUTIONS								
//									
/ /									
/ /									
_ / /									
//							-		
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//									

DS-DE 13 (7/98)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES									
(1) Name	BUALD (C. TICHE	(2	2) I.D. Number						
(3) Cover Period	d 10 / 1 / 03 through 10	30103 "	l) Page	of _					
(5) Date	(7) Full Name	(8) Purpose (add office sought if	(9)	(10)	(11)				
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	contribution to a candidate)	Expenditure Type	Amendment	Amount				
	NEADEWOLTGER	5							
//									
//									
//									
//									
/ /					-				
//									

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